CREEK NATION OF OKLAHOMA **HIGHER EDUCATION**

POST GRADUATE PROGRAM APPLICATION

NameSS#			
Address			
Street	City		Zip
Telephone	Email Address		
Name of college/university attending			
Address			
I Plan to attend Fall 20 Spri	ng 20	Full-Time	Part-Time
Year of Graduate School Field of Stu Other	udy	Degree: Master's	Doctoral
Contractual Agreement I hereby certify that the above informatio I understand that any higher education gruniversity in care of my name. I understa provide the proper documentation (Letter also grant permission for the graduate col information to the Creek Nation Higher E information is only to be used to determin	rant that I nand that to coordinate to coordinate to the coordinat	nay be awarded will be ontinue on the program attend term (s) and cl ed on this form to rele dministration. I under	e mailed to the m, I must ass schedule). I ase requested
Applicant's Signature		Date	
Please Attach the Following with A	pplication		rn to: on Higher Ed
1. Copy of Creek Tribal Enrollment Card		P.O. Box 58	U

Okmulgee, OK 74447

1. Copy of Creek Tribal Enrollment Card

2. Photograph

- 3. Education Degree Plan
- 4. Transcript Showing Bachelor's Degree Earned
- 5. Letter of Acceptance into the Graduate Program
- 6. Copy of Class Schedule